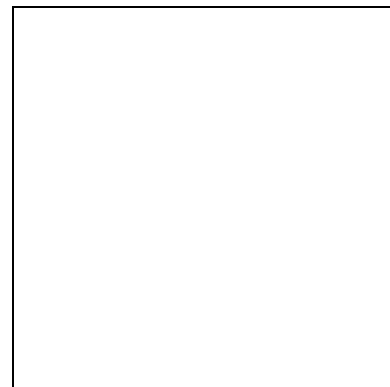


# **CONTINUATION SHEET MAINTENANCE FEE PAYMENT**

Line No.	AMC NUMBER	CLAIM/SITE NAME

Date Entered Into Computer: \_\_\_\_\_

Initials: \_\_\_\_\_ Verified: \_\_\_\_\_



**BLM DATE STAMP**

